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Carl Schaukowitc RADER, FISHMA 1233 20th Street, N Washington, DC 20	N & GRAUER, PLLC W, Suite 501	01124	THE HELL	I hereby certify that t	ertificate of Mailing or Trans his Fee(s) Transmittal is bein with sufficient postage for fir il Stop ISSUE FEE address PTO (703) 746-4000, on the c	g deposited with the Uniter st class mail in an envelop above, or being facsimil- late indicated below.
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*8001 APPLICATION NO.	FILING DATE		IRST NAMED INVE	NTOR	ATTORNEY DOCKET NO.	CONFIRMATION NO.
10/042,204	01/11/2002		Naotake Shuto		SAS-0206	6640
TITLE OF INVENTION: D	AMOND CUTTING METH	OD, ENNEAHED	RAL-CUT DIAMO	ONDS AND ASSEMBI	LY OF ENNEAHEDRAL-CU	T DIAMONDS
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APPLN. TYPE	SMALL ENTITY	ISSUE FE	E F	UBLICATION FEE	TOTAL FEE(S) DUE	DATE DUE
nonprovisional	YES	\$700		\$300	\$1000	05/24/2005
EXAM	INER	ART UNI	T C	LASS-SUBCLASS		
MORGAN, EILEEN P		3723	125-030010		_	
Number is required.  3. ASSIGNEE NAME AND		E PRINTED ON TI ow, no assignee d f this form is NOT	listed, no name w HE PATENT (print lata will appear on a substitute for fili	or type)	nee is identified below, the d	locument has been filed fo
Please check the appropriate	assignee category or categor	ies (will not be prir	nted on the patent):	☑ Individual ☐ C	Corporation or other private gr	oup entity Governmen
4a. The following fee(s) are	enclosed:		Payment of Fee(s):			-
Issue Fee	nall entity discount permitted			mount of the fee(s) is e		
Advance Order - # of	_				charge the required fee(s), or (enclose an extra c	credit any overpayment, to
a. Applicant claims SI	(from status indicated above) MALL ENTITY status. See 3	7 CFR 1.27.	b. Applicant is r	o longer claiming SMA	ALL ENTITY status. See 37 C	FR 1.27(g)(2).
The Director of the USPTO NOTE: The Issue Fee and Pu interest as shown by the reco	s requested to apply the Issue ablication Fee (if required) we rds of the United States Pater	e Fee and Publicati ill not be accepted at and Trademark (	on Fee (if any) or to from anyone other Office.	re-apply any previous than the applicant; a reg	sly paid issue fee to the applica gistered attorney or agent; or the	ation identified above. he assignee or other party in
Authorized Signature	Jainel	Pai	15	Date	March 24, 2005	<u> </u>
Typed or printed name _	David T. Nika	ido	<del></del>	Registration	n No. <u>22,663</u>	
This collection of informatio an application. Confidentiali submitting the completed ap	n is required by 37 CFR 1.31 by is governed by 35 U.S.C. plication form to the USPTO	1. The information 122 and 37 CFR 1 D. Time will vary of	is required to obta 14. This collection depending upon the	n or retain a benefit by is estimated to take 12 individual case. Any c	the public which is to file (an minutes to complete, includir comments on the amount of ti I Trademark Office, U.S. Dep S. SEND TO: Commissioner	d by the USPTO to process ng gathering, preparing, and me you require to complet

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Paperwork Reduction Act of 1995, no person are required to respond to a collection of information unless it displays a valid OMB control number. Complete if Known Effective on 12/08/2004. es pursuant to the Consolidated Appropriations Act, 2005 (H.R. 4818). 10/042,204-Conf. #6640 **Application Number FEE TRANSMITTAL** January 11, 2002 Filing Date Naotake Shuto First Named Inventor For FY 2005 E. P. Morgan **Examiner Name** X Applicant claims small entity status. See 37 CFR 1.27 3723 Art Unit SAS-206 TOTAL AMOUNT OF PAYMENT 1,015.00 Attorney Docket No.

METHOD OF PAYMENT	(check all t	nat apply)			-·· . <u>.</u>			
Check Credit Ca	ard M	Ioney Order	None	Other (	please identify	·):		
X Deposit Account Depos	it Account Numb	er. 18-0013 p	leposit Account	Name:	Rader, Fi	shman & Gra	auer PLLC	
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FEE CALCULATION								
1. BASIC FILING, SEARCH								
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Application Type	Fee (\$)	Small Entity Fee (\$)	Fee (\$)	Small Entity Fee (\$)	Fee (\$)	Small Entity Fee (\$)	Fees Pa	aid (\$)
Utility	300	150	500	250	200	100		
Design	200	100	100	50	130	65		
Plant	200	100	300	150	160	80		
Reissue	300	150	500	250	600	300		
Provisional	200	100	0	0	0	0		
2. EXCESS CLAIM FEES								Small Entity
Fee Description							Fee (\$)	Fee (\$)
Each claim over 20 (including	•						50	25
Each independent claim ove	r 3 (includin	g Reissues)					200 360	100 180
Multiple dependent claims			F D.:4	( <b>#</b> )	8814	iple Depende		100
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3. APPLICATION SIZE FEE				<u></u>				
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4. OTHER FEE(S)					, , , , , ,		Fees F	Paid (\$)
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SUBMITTED BY		1	2)				
Signature		leich	ZEK	Registration No. (Attorney/Agent)	22,663	Telephone	(202) 955-3750
Name (Print/Type)	David	T. Nikaido				Date	March 24, 2005